

<b>MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)</b>						<b>SERIAL NO.</b>	<b>FILING DATE</b>				
						<b>APPLICANT(S)</b>					
<b>CLAIMS</b>											
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT						
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
1	/						61				
2	/						62				
3	/						63				
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TOTAL IND.	5						TOTAL IND.				
TOTAL DEP.	21						TOTAL DEP.				
TOTAL CLAIMS	26						TOTAL CLAIMS				

PTO-1356 (3-79)

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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